INSTRUCTIONS: This for appropriate. All further corindicated unless corrected maintenance fee notification CURRENT CORRESPONDENCE.	the form, together with the should be used for transcription directed otherwise is. EADDRESS (Note: Use Block 1 for 12/20/2004	FEB 0 4 2	to: M	ail ax	(703) 746-4000 ATION FEE (if requois free maintenance fees prespondence address Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate.	ginia 22313-1450 ginia 23313-1450	or domestic mailings of the for any other accompanying ent or formal drawing, must
CU	22850				I hereby certify that to States Postal Service addressed to the Ma transmitted to the USI	rtificate of Mailing or Tran- his Fee(s) Transmittal is bein with sufficient postage for fit il Stop ISSUE FEE address PTO (703) 746-4000, on the o	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below. (Depositor's name) (Signature)
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APPLICATION NO. 10/088,506	98/06/2002	FIRST NAMED INVI			IUK	ATTORNEY DOCKET NO. 220806US6PCT	CONFIRMATION NO.
TITLE OF INVENTION: O	PTICAL PICKUP DEVICE SMALL ENTITY	AND RECORDIN			DUCING DEVICE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400			\$300	\$1700	03/21/2005
EXAMINER		ART UNIT		CI	ASS-SUBCLASS	1 .	
CHEN, TIANJIE		2652			720-663000	J	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Composite the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Composite the name of a single firm (
Please check the appropriate 4a. The following fee(s) are	assignee category or catego	<u>-</u>	inted on the pa		☐ Individual 🚨 C	orporation or other private gr	oup entity Government
⊠ Issue Fee			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).				
	MALL ENTITY status. See	e) 37 CFR 1.27.	☐ b. Applica	ınt is no	longer claiming SMA	LL ENTITY status. See 37 Cly paid issue fee to the application of the state of the	FR 1.27(g)(2).

FEB 0 4 2005 Authorized Signature

Typed or printed name

Joseph Scafetta, Jr. Registration No. Reg. No. 26,803

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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